




IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Weinhofer et al.
Title: METHOD AND SYSTEM FOR
GENERATING MULTI-
DIMENSIONAL MOTION
PROFILES
Appl. No.: To be determined
Filing Date: To be determined
Examiner: To be determined
Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 979071694 US	9/30/03
(Express Mail Label Number)	(Date of Deposit)
Karen Meier (Printed Name)	
 (Signature)	

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop NEW PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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Enclosed are:

- [X] Specification, Claims, and Abstract (100 pages, plus cover sheet).
- [X] Application Data Sheet (37 CFR 1.76) (3 pages).

☒ Informal drawings (29 sheets, Figures 1A, 1B, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, and 31).

☒ Executed Declaration and Power of Attorney (5 pages).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$750.00		\$750.00
Total	26	-	20	=	6	x	\$18.00	=	\$108.00
Claims:									
Independ	7	-	3	=	4	x	\$84.00	=	\$336.00
ents:									
If any Multiple Dependent Claim(s) present:						+	\$280.00	=	\$0.00
							SUBTOTAL:	=	\$1194.00
<input type="checkbox"/>							Small Entity Fees Apply (subtract ½ of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$1,194.00

☒ Check No. 13024 in the amount of \$1,194.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 9-30-03

By D. L. Luetgen

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